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Eprm 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047 2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2012 calendar year, or tax year beginning 2012, and ending D Employer Identification Number C Name of organization China Harvest, Check if applicable Address change Doing Business As 54-1852027 Number and street (or P O box if mail is not delivered to street addr) Room/suite Telephone number Name change Initial return O. Box 12249 (316) 942-8295 7IP code + 4 City, town or country Terminated Amended return Wichita 67277-2249 G Gross receipts \$ 766,028. F Name and address of principal officer H(a) Is this a group return for affiliates? Application pending Are all affiliates included? Garv A. Russell P. O. Box 12249 Wichita KS 67277-22 'No,' attach a list (see instructions) 501(c) (4947(a)(1) or Tax-exempt status X 501(c)(3) (insert no.) 527 Website: ► H(c) Group exemption number Corporation Trust Other -L Year of Formation 1997 M State of legal domicile KS Form of organization Association Part I Summary Briefly describe the organization's mission or most significant activities The primary exempt purpose of China Harvest, Inc.: A strategic catalyst for Governance people worldwide Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 10 Number of independent voting members of the governing body (Part VI, line 1b) 4 8 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 5 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 763,117 605,941. Program service revenue (Part VIII, line 2g) 5,250 Investment income (Part VIII, column (A), lines 3, 4, and 70 10 -7,006. -900. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 1,466 875. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A) 12 605,916. 762,827 Grants and similar amounts paid (Part IX, column (A), tipes 13 491,774 428,237. Salaries, other compensation, employee benefits (Part IX, column (A), Junes Professional fundraising fees (Part IX) 0 15 187,098 184,282. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,841. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 70.289 47,249. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 749,161 659,768. Revenue less expenses Subtract line 18 from line 12 -53,852. 13,666. ල**ා ල End of Year Beginning of Current Year** Total assets (Part X, line 16) 20 462,182 311,559. 21 Total liabilities (Part X, line 26) 110,752 13,981. 22 Net assets or fund balances Subtract line 21 from line 20 351,430. 297.578. Part II Signature Block this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and sed on all information of which preparer has any knowledge Under penalties of perjury, I declare that Signature of offic Sign Here Board Secretary Steve Miller Type or print name and title Print/Type preparer's name P00712294 Eugene W. Jahn self-employed Paid Preparer Firm's name JAHN & ASSOCIATES Use Only Firm's EIN Firm's address BOX 64512 P.O. 23467

VA

Form 990 (2012)

X Yes

VIRGINIA BEACH

May the IRS discuss this return with the preparer shown above? (see instructions)

Phone no

FUIII	1990 (2012) China Harvest, Inc. 54-1832027	1 age z
Pa	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	· · · · · <u> </u>
1	Briefly describe the organization's mission	
	The primary exempt purpose of China Harvest, Inc.: A strategic	
	catalyst for service to Chinese	
	people worldwide.	 _
2		_
	Form 990 or 990-EZ?	X No
	If 'Yes,' describe these new services on Schedule O	_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes	X No
	If 'Yes,' describe these changes on Schedule O	_
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expensive Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocation others, the total expenses, and revenue, if any, for each program service reported	ses ns to
4 8	a (Code) (Expenses \$ 512,452. including grants of \$ 428,237.) (Revenue \$	0.)
	Contributed financial support to those who have similar service programs in	
	Eastern Asian countries. In addition to the above programs, funds were	
	provided for humanitarian needs, giving food to the needy, support	
	to those who can't work, medical assistance, etc.	
41	b (Code) (Expenses \$ 13,028. including grants of \$ 0.) (Revenue \$	0.)
•	Worked on planning and logistics associated with leading individuals on future	
	to China. In the past, trip participants have expressed a desire to help the	
	of China	
		-
	c (Code) (Expenses \$ 88,164. including grants of \$ 0.) (Revenue \$	0 1
4		0.)
	Service and administrative activities associated with multiple projects that	
	cannot be allocated to any one program but are necessary to conduct the	
	primary exempt purposes of this organization.	
		
4	d Other program services (Describe in Schedule O)	
	(Expenses \$ including grants of \$) (Revenue \$	_)

54-1852027 Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If Yes,' complete Х 2 Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . Х 3 Х 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If Yes,' complete Schedule C, Part III . Х 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, 6 Х Did the organization receive or hold a conservation easement, including easements to preserve open space, the Х environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management credit repair, or debt negotiation X services? If 'Yes,' complete Schedule D, Part IV . . . 9 X 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule x Х 11b Х 11 c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Х In Part X, line 16? If 'Yes,' complete Schedule D, Part IX Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. . . 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X . . . X 111 12a Did the organization obtain separate, independent audited financial statements for the tax year? If Yes,' complete Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and If the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional Х Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. X 14a Did the organization maintain an office, employees, or agents outside of the United States?........ 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Х 14b X 15 Х 16 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II . 18 X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If Yes, Х complete Schedule G, Part III. 19 Х 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

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20 b

Part IV Checklist of Required Schedules (continued) Yes No X 21 Х 22 Did the organization answer 'Yes' to Part VII. Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If Yes, 'complete X 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and X complete Schedule K If 'No, 'go to line 25............... 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24d Х b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Х 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II. 26 Х Х 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) X a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х 28b Х 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Х 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If Yes, complete Schedule N, Part I. 31 Х 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, X X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 35b Х Х 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is X treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37

> Х Form 990 (2012)

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

54-1852027 Form 990 (2012) China Harvest, Inc. Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V No 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a 0 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 10 2 a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?...... 3 b b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O. 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . 4 a **b** If 'Yes,' enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts X 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?..... $\overline{\mathbf{x}}$ b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х solicit any contributions that were not tax deductible as charitable contributions? Organizations that may receive deductible contributions under section 170(c). X 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Х 7 c 7 e Х e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?.... 7 f $\overline{\mathbf{x}}$ f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. . . g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7 h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business 8 Sponsoring organizations maintaining donor advised funds. 9 b **b** Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter 11 a b Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | 12b| 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13a

TEEA0105 08/08/12

Note. See the instructions for additional information the organization must report on Schedule O

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

 $\overline{\mathbf{x}}$

Form 990 (2012)

Form 990 (2012) China Harvest, Inc. 54-1852027 Page 6 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year . . 10 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 8 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?............... X 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Х Did the organization have members or stockholders?....... 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body? 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х 8 a Х 86 **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х 12b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12c X 13 Did the organization have a written whistleblower policy? 13 Х Did the organization have a written document retention and destruction policy? 14 X Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х a The organization's CEO, Executive Director, or top management official . . . 15 a Х **b** Other officers of key employees of the organization 15b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Х b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?.... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website Own website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization 20

Tisha Maydew

Wichita,

4628 W. Central

KS 67212 (316) 942-8295

orm 990 (2012)	China Harv	vest, In	c.					54-1852027	Page 7
Partiviii Com Inder	pensation of cendent Cont	Officers, D tractors	Directors, Trus	stees, Ke	ey Emplo	yees, Hi	ghest Co	mpensated Empl	loyees, and
Check	ıf Schedule O cor	ntains a respo	onse to any questi	ion in this Pa	art VII			<u></u>	<u>L</u>
Section A. Off	icers. Directo	ors. Truste	es. Kev Empl	lovees, a	nd Hiahe	st Com	pensated	Employees	

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - · List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization	nor any rela	ated o	rgan			ompe	nsate	ed any current officer,	director, or trustee	
				(C	•					
(A) Name and Title	(B) Average hours per	offic	er an	not c less p d a di	recto	more that is both r/trustee	an an)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
_(1)_CBeck	1.00	х						0.	0.	0.
(2) J. Brown	1.00						_			
Director/Treasurer]	Х		Х				0.	0.	0.
(3) M. Gilliam	1.00									
Director/Vice Chairman_	ļ	Х		X				0.	0.	0.
_(4)_PLee	1.00							_	_	
Director		Х		<u> </u>				0.	0.	0.
	1.00	x						0.	0.	0.
(6) S. Miller	50.00									
Director/Secretary	1	_x		х	х	<u> </u>		10,820.	0.	38,243.
_(7)_GRussell	50.00									
Director/President		Х		Х	Х	Х		14,118.	0.	50,255.
_(8) R.T. Weiner, Jr.	1.00									
Director		Х	_			ļ		0.	0.	0.
_(9) M. Weber Director/Chairman	1.00	x		х				0.	0.	0.
(10) M. Winn Director	1.00	x						0.	0.	0.
(11) D. Guo	1.00	<u> </u>								
Director	1	x						0.	0.	0.
(12)										
(13)										
(14)				-	_					
				<u> </u>	<u> </u>		L			

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization

Form 990 (2012) China Harvest, Inc.

Part VIII Statement of Revenue

		Check if Schedule O conta	ıns a respon	se to any question ii	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
F E	1 a	Federated campaigns	1a					
篜흶	b	Membership dues	1b					
준취	С	Fundraising events	1c			İ		
뜯띎		Related organizations	}	-				
NS, (Government grants (contributions)	<u> </u>					
ģ ‰	e	Government grants (contributions)	· · •		i			
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f	All other contributions, gifts, grants, similar amounts not included above		605,941.				
용뵑	g	Noncash contributions included in ir	ns 1a-1f \$_	159,934.				
ر س	h	Total. Add lines 1a-1f			605,941.	Ì		
3				Business Code				
PROGRAM SERVICE REVENUE	2 a		Ī					
2	b							
욁	c							
質	ر م							
₹	u	-						
8	e							
2		All other program service reve						
_	g	Total. Add lines 2a-2f	· · <u>·</u> · · ·					
	3	Investment income (including						
		other similar amounts)		F	430.	0.	0.	430.
	4	Income from investment of ta	-	· · · · · · · · · · · · · · · · · · ·				
- 1	5	Royalties						
			(ı) Real	(II) Personal	1			
	6 a	Gross rents	850.					
	b	Less rental expenses						
	С	Rental Income or (loss)	850.					
		Net rental income or (loss)			850.	0.	0.	850.
		` [i) Securities	(ii) Other	850.	0.		830.
	7 a Gross amount from sales of assets other than inventory 158,604.			+				
l		assets other than inventory	158,604.					
	b	Less cost or other basis			ł	İ		ì
			<u> 159,934.</u>					
		Gain or (loss)	<u>-1,330</u> .			·· ·· 		
	d	Net gain or (loss)	• • • • • •	. <u> </u>	-1,330.	0.	0	-1,330.
ш	8 a	Gross income from fundraising	ng events					
VENUE		(not including. \$						
2		of contributions reported on li	ine 1c)					
OTHER RE		See Part IV, line 18			j			
풀	b	Less direct expenses	1	o				
0	С	Net income or (loss) from fun	idraising eve	nts · · · · · ▶				
	9 a	Gross income from gaming a See Part IV, line 19	ctivities					
	L-	Less direct expenses		<u></u>				
		Net income or (loss) from gain						⁻
		` ,	J					
	10 a	Gross sales of inventory, less	s returns					
		and allowances		202.				[
		Less cost of goods sold		1 <u>78.</u>				
	С	Net income or (loss) from sal	es of invento		24.	24.	0.	0.
		Miscellaneous Revenue		Business Code				
	11 a	Misc		900099	1.	1.	0.	0.
	b		[
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d			1.			
		Total revenue. See instruction			605,916.	25.	0.	-50.

Form 990 (2012) China Harvest, Inc. 54-1

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a res	sponse to any question in	n this Part IX		
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	303,403.	303,403.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	22,100.	22,100.		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	102,734.	102,734.		
4 5	Benefits paid to or for members	118,368.	114,934.	915.	2,519.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	•			•
7	Other salaries and wages	46,292.	21,559.	24,241.	492.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	240.	240.	0.	0.
9	Other employee benefits	16,594.	15,764.	0.	830.
10	Payroll taxes	2,788.	0.	2,788.	0.
11	· ·	2,700.		2,700.	
	Management				
	Legal				
	Accounting	5,135.	0.	5,135.	0.
	Lobbying	5,133.		3,133.	
	Professional fundralsing services See Part IV, line 17				·····
	Investment management fees				
	Other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch 0)				
13	Office expenses	13,038.	9,284.	3,754.	0.
14	Information technology	3,726.	2,475.	1,251.	0.
15	Royalties	3,7201	2/3/3.	1,231.	
16	Occupancy	4,095.	4,095.	0.	0.
17	Travel	10,577.	10,577.	0.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	10,3,.0			
	Conferences, conventions, and meetings Interest	3,663.	3,663.	0.	0.
20 21					
	Payments to affiliates	2 014	2 225	1 570	
22 23	Insurance	3,814.	2,235.	1,579.	0.
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	2,419.	0.	2,419.	0.
ε	Membership licenses/dues	66.	. 0.	66.	0.
	Films/tapes	11.	11.	0.	0.
	Books/subscriptions	565.	565.	0.	0.
c					
6	All other expenses	140.	5.	135.	0.
25	Total functional expenses. Add lines 1 through 24e	659,768.	613,644.	42,283.	3,841.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here Interpretation [Interpretation of the column				

Form 990 (2012) China Harvest, Inc. **Balance Sheet** Part X 3 4

(A) Beginning of year End of year 1 84,292. 191,272 2 123,587. 154,021 3 4 6,148 0. Loans and other receivables from current and former officers, directors 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 8 5,151. 8,398 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 10 b 10 c 102,343 98.529. 11 Investments - other securities See Part IV, line 11 12 12 Investments – program-related See Part IV, line 11 13 13 14 14 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 462,182 311,559. 17 97,750 17 3,041. 18 18 12,852 10,790. 19 19 150 150. 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 Total liabilities. Add lines 17 through 25...... 110,752 26 13,981. Organizations that follow SFAS 117 (ASC 958), check here ▶ k and complete lines 27 through 29, and lines 33 and 34. 27 27 163,843 143,659. 28 187,587 153,919. 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 33 351,430. 297,578. 34 34 462,182 311,559. Form 990 (2012)

BAA

P

2 Total expenses (must equal Part IX, column (A), line 25)	05,9 59,7 53,8	16.						
1 Total revenue (must equal Part VIII, column (A), line 12) 1 6 2 Total expenses (must equal Part IX, column (A), line 25) 2 6	05,9 59,7 53,8	16.						
2 Total expenses (must equal Part IX, column (A), line 25)	59,7 53,8							
	53,8	68.						
3 Revenue less expenses Subtract line 2 from line 1	51.4	<u>52.</u>						
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	351,430.							
5 Net unrealized gains (losses) on investments								
6 Donated services and use of facilities								
7 Investment expenses								
Prior period adjustments								
9 Other changes in net assets or fund balances (explain in Schedule O)								
Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,								
	<u>97,5</u>	<u>78.</u>						
Part XII Financial Statements and Reporting		_						
Check if Schedule O contains a response to any question in this Part XII	· · <u>·</u>	$\Box\Box$						
	Yes	No						
1 Accounting method used to prepare the Form 990 Cash X Accrual Other								
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O								
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?		X						
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both								
Separate basis Consolidated basis Both consolidated and separate basis								
b Were the organization's financial statements audited by an independent accountant?		Х						
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate								
basis, consolidated basis, or both								
Separate basis Consolidated basis Both consolidated and separate basis								
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?								
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O								
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		х						
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits								
	990 (2012)						

TEEA0112 08/09/11

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047 2012

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Employer identification number

Cn1	na	Harvest, Inc.							54-18	52021	<u></u>		
Part	1	Reason for Publ	ic Charity Status	(All organizations r	nust co	mplete	this p	art) S	ee instr	ructions	S.		
The o	rgar	ization is not a private	foundation because it	is (For lines 1 through 1	11, check	only on	e box)						
1	П	A church, convention of	of churches or associa	tion of churches describe	ed in sec	tion 170)(b)(1)(A)(i).					
2	П	A school described in a	section 170(b)(1)(A)(i	i). (Attach Schedule E)									
3	П	A hospital or a coopera	ative hospital service o	organization described in	section	170(b)(1)(A)(iii)						
4	Ħ	A medical research or	ganization operated in	conjunction with a hospi	ital descr	ibed in s	section 1	170(b)(1)(A)(iii)	Enter the	e hospital's		
	ш	name, city, and state									·		
5		= "		college or university owi	ned or op	perated t	by a gove	ernment	al unit de	escribed	ın section		
6	П		•	rnmental unit described	ın sectio	n 170(b)(1)(A)(v	r).					
7	X	An organization that no in section 170(b)(1)(A		stantial part of its suppor	rt from a	governn	nental ur	nt or fro	m the ge	neral pul	blic describe	ed	
8	11	A community trust des	cribed in section 170((b)(1)(A)(vi). (Complete	Part II)								
9				re than 33-1/3% of its sup ertain exceptions, and (2 in 511 tax) from businesse									
10		An organization organi	zed and operated exc	lusively to test for public	safety S	See sect	ion 509((a)(4).					
11		An organization organization supported organization supporting organization	ns described in section	sively for the benefit of, to 509(a)(1) or section 509 11e through 11h	perform 9(a)(2) S	the fund See sect	tions of, ion 509(or carry (a)(3). C	out the particle out the	urposes box that	of one or mo t describes	ore put the typ	olicly be of
		a Type I b	Type II c	Type III - Function	ally integ	rated	d	ı 🗍 1	ype III -	- Non-fu	nctionally in	tegrate	ed
е		By checking this box, to other than foundation is section 509(a)(2)	l certify that the organi managers and other th	zation is not controlled d nan one or more publicly	irectly or supporte	ındırect ed organ	ly by one	e or more describe	e disqual ed in sect	lified per tion 509(sons (a)(1) or		
f		If the organization received this box		nation from the IRS that	ıs a Typ	е I, Туре	ll or Ty	pe III su	pporting	organiza	ation,		. 🔲
g		Since August 17, 2006	6, has the organization	accepted any gift or co	ntribution	from ar	ny of the	followin	g person	ıs?			
_			•				-		•			Yes	No
				trols, either alone or toge orted organization?							. 11 g (i)		
		(ii) A family membe	r of a person describe	d in (i) above?		<i>.</i>					. 11 g (ii)		
		(iii) A 35% controlled	d entity of a person de	scribed in (i) or (ii) above	9						· 11 g (iii)		
h		Provide the following in	nformation about the s	upported organization(s))						1 . 3 ()		
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) is organiza column (i) your gov docum	ition in listed in verning	(v) Did you the organiz column (i) suppo	zation in	(vi) Is organiza columi organized U S	ition in n (i)	(vli) Amount sup		etary
					Yes	No	Yes	No	Yes	No			
(A)]								
(B)											_	-	
·- <i>,</i>		· · · · · · · · · · · · · · · · · · ·			†	_			-				
(C)											<u> </u>		
(D)													
(E)					<u> </u>			_					
Total													

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

54-1852027

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

<u> </u>	tion A. Public Support						
	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	857,152.	732,913.	785,249.	763,117.	605,941.	3,744,372.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	857,152.	732,913.	785,249.	763,117.	605,941.	3,744,372.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,462,621.
6	Public support. Subtract line 5 from line 4						2,281,751.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	857,152 <u>.</u>	732,913.	785,249.	763,117.	605,941.	3,744,372.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,470.	1,659.	1,573.	1,791.	1,280.	9,773.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)			1,641.	277.	1.	1,919.
11	Total support. Add lines 7 through 10						3,756,064.
12	Gross receipts from related activiti	es, etc (see instruc	ctions)			12	24,956.
13	First five years. If the Form 990 is organization, check this box and s	s for the organization top here	on's first, second, the	hird, fourth, or fifth	tax year as a sect	ion 501(c)(3)	▶ 🏻
Sec	tion C. Computation of Pu	blic Support P	ercentage				
14	Public support percentage for 201:	2 (line 6, column (f) divided by line 11	, column (f))		14	60.75%
15	Public support percentage from 20	011 Schedule A, Pa	art II, line 14			15	65.49%
16 a	33-1/3% support test - 2012. If and stop here. The organization of	the organization di qualifies as a public	d not check the book by supported organ	x on line 13, and th	ne line 14 is 33-1/3	% or more, check	this box
t	33-1/3% support test — 2011. If t and stop here. The organization of						
17 <i>a</i>	10%-facts-and-circumstances to or more, and if the organization me the organization meets the facts-a	eets the 'facts-and-	-circumstances' tes	t, check this box a	nd stop here. Exp	lain in Part IV how	_
	o 10%-facts-and-circumstances to or more, and if the organization morganization meets the facts-and-	eets the 'facts-and- circumstances' tes	-circumstances' tes t The organization	it, check this box a qualifies as a pub	nd stop here. Exp licly supported org	olain in Part IV how anization	the · · · · · · · ►
18	Private foundation. If the organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or 1	7b, check this box	and see instruction	ons ▶ 📗

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sect	tion A. Public Support		_					
	dar year (or fiscal yr beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012		(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any unusual grants)					-		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6)							
Sec	tion B. Total Support							
Calen	dar year (or fiscal yr beginning in) >	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	: [(f) Total
	Amounts from line 6							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
13	Total support. (Add Ins 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is organization, check this box and s	s for the organization	on's first, second,	third, fourth, or fifth	tax year as a sec	tion 501(c)(3)		▶ □
Sec	tion C. Computation of Pu							
15	Public support percentage for 201			3, column (f))			15	ક
16	Public support percentage from 20					r	16	8
	tion D. Computation of Inv				 			
17	Investment income percentage for))		17	8
18	Investment income percentage fro						18	8
	33-1/3% support tests - 2012. If is not more than 33-1/3%, check the	the organization d	id not check the b	ox on line 14, and	line 15 is more tha	n 33-1/3%. a	nd line 17	, ► ∏
b	33-1/3% support tests — 2011. If line 18 is not more than 33-1/3%,	the organization d	id not check a box	on line 14 or line	19a, and line 16 is	more than 33	3-1/3%. a	nd ····▶ ∏
20	Private foundation. If the organiz							

Schedule A (Form 990 or 990-EZ) 2012 China Harvest, Inc.	54-1852027	Page 4
Part IV Supplemental Information. Complete this part to provide the explanations re Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any add (See instructions).	quired by Part II, line 10; itional information.	
Other Income Part II, Line 10		
Description: Refunds-prior year expenses		
2010: 1641.		
2011: 277.		
Description: Misc		
2012: 1.		
<u></u>		
	-	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection
Employer Identification number

Chi	na Harvest, Inc.				54-18	52027		
Par		Advised Funds or Oti	ner Similar Funds	or Ac			if	
. ul	the organization answered 'Yes' to	Form 990, Part IV, line 6	6.					
		(a) Donor advised	funds	(b)	Funds and	other accoun	nts	
1	Total number at end of year							
2	Aggregate contributions to (during year)							
3	Aggregate grants from (during year)							-
4	Aggregate value at end of year			•				
5	Did the organization inform all donors and donor are the organization's property, subject to the organization's	advisors in writing that the ass	ets held in donor advis	ed fund:	[Yes		No
6	Did the organization inform all grantees, donors, a for charitable purposes and not for the benefit of t impermissible private benefit?	and donor advisors in writing the donor or donor advisor, or	nat grant funds can be for any other purpose o	used on	ily ¹⁹	 ∵ ∵Yes		l No
Par							Ш	
<u> </u>	Purpose(s) of conservation easements held by the			OHIII 93	0, 1 ail 1	v, III 6 7.		
•	Preservation of land for public use (e.g., recre	•	Preservation of an	historic	ally importa	nt land area		
	Protection of natural habitat	Janon or oddoddony	Preservation of a c					
	Preservation of open space							
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation co	ontribution in the form	of a con	servation ea	asement on t	he	
	,,		ĺ		Held at the	e End of the	Tax	Year
e	Total number of conservation easements		<i>.</i>	2 a				
t	Total acreage restricted by conservation easemer	nts		2 b				
	Number of conservation easements on a certified			2 c				-
c	Number of conservation easements included in (o structure listed in the National Register			2 d				
3	Number of conservation easements modified, trar tax year ►	nsferred, released, extinguishe	ed, or terminated by the	e organi	zation durin	g the	•	
4	Number of states where property subject to conse	ervation easement is located	·					
5	Does the organization have a written policy regard and enforcement of the conservation easements is	ding the periodic monitoring, in tholds?	nspection, handling of v	violation	s, [Yes	П	No
6	Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing cons	ervation easements du	uring the	year	_		'
7	Amount of expenses incurred in monitoring, insper	ecting, and enforcing conserva	tion easements during	the yea	r			
8	Does each conservation easement reported on lir and section $170(h)(4)(B)(ii)$?	ne 2(d) above satisfy the requi	rements of section 170)(h)(4)(B)(i) • • • • • [Yes		No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to the conservation easements	e organization's financial state	ments that describes to	he orga	nization's ad	counting for	and	l
Par	Organizations Maintaining Collect Complete if the organization answer	ctions of Art, Historica ered 'Yes' to Form 990, F	I Treasures, or Of Part IV, line 8.	ther S	imilar As	sets.		
1 8	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its financial	ld for public exhibition, educat	ion, or research in furth					
t	If the organization elected, as permitted under SF historical treasures, or other similar assets held to following amounts relating to these items	FAS 116 (ASC 958), to report in public exhibition, education,	n its revenue statemen or research in furthera	nt and ba	alance shee public servic	t works of art e, provide the	t, e	
	(i) Revenues included in Form 990, Part VIII, line	e1			► \$	\$		
	(ii) Assets included in Form 990, Part X							
	If the organization received or held works of art, he amounts required to be reported under SFAS 116	6 (ASC 958) relating to these it	ems					
	Revenues included in Form 990, Part VIII, line 1							
ŀ	Assets included in Form 990, Part X	<u> </u>			▶ \$	•		

Schedule D (Form 990) 2012 China Harvest, In		ried Troppures or	54-185		Page 2
Part III Organizations Maintaining Collection				· · ·	iea)
3 Using the organization's acquisition, accession, and other items (check all that apply)		,	re a significant use of its	collection	
a Public exhibition	\vdash	or exchange programs			
b Scholarly research	e Other				
 c Preservation for future generations. 4 Provide a description of the organization's collections ar Part XIII 	nd explain how the	ey further the organization	's exempt purpose in		
 5 During the year, did the organization solicit or receive do to be sold to raise funds rather than to be maintained as 	onations of art, his	storical treasures, or other	sımılar assets	Yes	No
Part IV Escrow and Custodial Arrangements.					
reported an amount on Form 990, Part	X, line 21.	G		,	-,
1 a Is the organization an agent, trustee, custodian, or other on Form 990, Part X?				Yes	No
b If 'Yes,' explain the arrangement in Part XIII and comple					
bit Tes, explain the arrangement in Fart Air and comple	te the lollowing ta	DIE		Amount	
c Beginning balance					
d Additions during the year					· · ·
e Distributions during the year					
f Ending balance			. 1f		
2a Did the organization include an amount on Form 990, Pa	art X, line 21? .			Yes	No
b If 'Yes,' explain the arrangement in Part XIII Check here	e if the explantion	has been provided in Par	t XIII	 [
		·			
Part V Endowment Funds. Complete if the organization	ganization ans		990, Part IV, line 10		
(a) Current	(b) Prior yea	ar (c) Two years	(d) Three years	(e) Four yea	ırs
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance				T	
2 Provide the estimated percentage of the current year en	nd balance (line 1g	g, column (a)) held as			
a Board designated or quasi-endowment ▶	<u> </u>				
b Permanent endowment ► %					
c Temporarily restricted endowment ►					
The percentages in lines 2a, 2b, and 2c should equal 10	00%				
3 a Are there endowment funds not in the possession of the organization by	organization that	are held and administere	ed for the	Yes	No
(i) unrelated organizations				. 3a(i)	
(ii) related organizations				. 3a(ii)	
b If 'Yes' to 3a(II), are the related organizations listed as re	equired on Schedu	ule R?		. 3b	<u> </u>
4 Describe in Part XIII the intended uses of the organization	on's endowment f	unds			
Part VI Land, Buildings, and Equipment. See	Form 990, Pa	rt X, line 10.			
	est or other basis investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	alue
1 a Land		46,000.	·	46	,000.
b Buildings		56,843.	6,702.	50	,141.
c Leasehold improvements					
d Equipment		22,459.	20,071.	2	,388.
e Other		1,022.	1,022.		0.
Total. Add lines 1a through 1e (Column (d) must equal Form	990, Part X, colui	mn (B), line 10(c))			<u>,</u> 529.
BAA			Sched	ule D (Form 99	0) 2012

Schedule D (Form 990) 2012 China Harvest, Inc			Page 3
Part VII Investments - Other Securities. See I	Form 990, Part X, line	12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			-
(E)		···	
(F)			
(G)			
(H)			
(1)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12) ▶			
Part VIII Investments - Program Related. See		13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)		<u></u>	
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13) >	<u></u> l		
Part IX Other Assets. See Form 990, Part X, lin	e 15		
		(b) Book valu	ue
(a) Des		(b) Book valu	ue
		(b) Book valu	ue
(a) Des		(b) Book valu	ue
(a) Des (1) (2)		(b) Book valu	ue
(a) Des (1) (2) (3)		(b) Book valu	ue
(a) Des (1) (2) (3) (4)		(b) Book valu	ue
(a) Des (1) (2) (3) (4) (5)		(b) Book valu	ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8)		(b) Book valu	ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9)		(b) Book value	ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9)	scription		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X,	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2)	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2) (3)	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2) (3) (4)	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)	ne 15)		ue
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(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	ne 15)		ue
(a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), In Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)	ne 15)		

Schedule D (Form 990) 2012 China Harvest, Inc.	54-1852027	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	per Return	
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	<u> </u>	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b 4 a		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses		
1 Total expenses and losses per audited financial statements		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII)	——	
e Add lines 2a through 2d		
3 Subtract line 2e from line 1		
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	-	
a Investment expenses not included on Form 990, Part VIII, line 7b 4 a		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part XIII Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, I line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any a	additional information	
		-
		-
BAA	Schedule D (Form	990) 2012

Schedule D (Form 990) 2012 China Harvest, Inc. Part XIII Supplemental Information (continued)	54-1852027	Page 5
Part XIII Supplemental Information (continued)		
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TEEA3305 06/08/12

Schedule **D** (Form 990) 2012

BAA

Schedule F (Form 990)

Statement of Activities Outside the United States

2012

Department of the Treasury Internal Revenue Service

Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.
 Attach to Form 990.
 See separate instructions.

Open to Public

OMB No 1545-0047

Name of the organization

Inspection Employer identification number

China Harvest, Inc. 54-1852027 Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' to Form 990. Part IV. line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (b) Number of (c) Number of (e) If activity listed in (f) Total (d) Activities conducted in (a) Region offices in the employees, region (by type) (e.g., (d) is a program expenditures for service, describe specific type of agents, and fundraising, program and investments region independent services, investments, in region contractors in grants to recipients service(s) in region region located in the region) (1) East Asia and Pacific 0 0 Program Services Overseas travel 8,134. 0 (2) East Asia and Pacific O Grants to region Educ. & humanitarian 44,334. 0 58,400. (3) East Asia and Pacific 0 Grants to region Translation work (4) (5) (6) (7) (8) (9) (10)(11)(12)(13)(14)(15)(16)(17)3 a Sub-total **b** Total from continuation sheets to Part I c Totals (add lines 3a and 3b) 1110,8868.

China Harvest, Inc.

Schedule F (Form 990) 2012

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(i) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2012 (h) Description of non-cash assistance (g) Amount of non-cash assistance 53,000. wire transfer (f) Manner of cash disbursement (e) Amount of cash grant East Asia and Pacific Translation work (d) Purpose of grant (c) Region (b) IRS code section and EIN (if applicable) 3 Enter total number of other organizations or entities. BAA (a) Name of organization 9 Ξ (12) (13) Ξ 3 ල 3 9 9 $\mathbf{\epsilon}$ 8 6 (45) (15) (16)

Page 3

China Harvest, Schedule F (Form 990) 2012

|Parimal Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2012 (g) Description of non-cash assistance (f) Amount of non-cash assistance 37,351. various means (e) Manner of cash disbursement 5,035. delivered 1,948. delivered (d) Amount of cash grant (c) Number of recipients (1) Education support/training East Asia and Pacific 150 (3) Humanitarian to indigent East Asia and Pacific 130 (2) Humanitarian worker support East Asia and Pacific 254 (b) Region (a) Type of grant or assistance (18) BAA <u>4</u> <u>6</u> Ξ (12) (17) (2) (9) 9 (13) 8 6 (14) (15) (16)

Sche	dule F (Form 990) 2012 China Harvest, Inc.	54-1852027	Page 4
Pa	Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Tyes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)		X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If Yes, the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No
BAA	TEEA3505 12/17/12	Schedule F (Fo	rm 990) 2012

TEEA3504 12/17/12

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Schedule F (Form 990) 2012

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

2012

OMB No 1545-0047

Department of the Treasury Internal Revenue Service	Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. Attach to Form 990.	Open to Public Inspection	<u>₽</u> _
Name of the organization	Employer Ids	Employer identification number	
China Harvest, Inc.	Inc. 54-1852027	152027	
Part General In	Part I General Information on Grants and Assistance		
1 Does the organiza	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the grants or assistance?	L	

ջ □ x Tes Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

(a) Name and address of organization or government	(b) EiN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Agape_Way 5616_Country_Lane Greensboro_NC_27410	56-2222794	501(c)(3)	22,000.				Educ grant
20	20-1648411	501(c)(3)	20,600.				Humanitarian s
	36-2428692	501(c)(3)	.000,000				Printed materi
	26-0763646	501(c)(3)	28,700.				Humanitarian/O
In te	91-1550156	501(c)(3)	40,299.				Humanitarian s
istian_A 	44-0610626	501(c)(3)	10,000.				Humanitarian s
1	20-8565593	501(c)(3)	85,867.				Printed materi
 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	and government organs listed in the line 1 t	Inizations listed in the	line 1 table			A A	8
BAA For Paperwork Reduction Act Notice, see the Instructions for Fo	, see the Instruction	ıs for Form 990.		TEEA3901 11/30/12	11/30/12	Schedu	Schedule I (Form 990) (2012)

Page 2 Schedule I (Form 990) (2012) China Harvest, Inc.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Grants-educational	3	22,400.			į
Grants-humanitarian support	2	1007			
1 (1	2	9,840.			
Grants-translating books	1	491.			
Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information	lete this part to pre	ovide the information	n required in Part I,	line 2, Part III, column	(b), and any other
Pt_I Line_2China Harvest verbally communicates with the organizations, to which	verbally comm	unicates_with_t	he organizatio	ns. to which	
Pt_I_Line_2grants_are_provided.	- 1	Typically, organizations will inform	ions_will_info	<u>.</u>	
<u>Pt_I_Line_2China_Harvest_</u>	when_and_how_	<u>China Harvest when and how funds are used.</u>			
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Schedule I (Form 990) (2012)

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No 1545-0047

2012

Open To Public Inspection

lame o	of the organization				Employer Identifi	cation num	iber	
Chi	na Harvest, Inc.			_	54-18520	27		
Par							-	
	, ,,	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribut amounts reporte on Form 990, Part VIII, line 1	d noncas	(d) thod of de sh contrib	etermini	
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests				İ			
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles		·-					
7	Boats and planes					_		_
8	Intellectual property							
9	Securities - Publicly traded	Х	1	159,9	34. FMV			
10	Securities – Closely held stock							
11	Securities - Partnership, LLC, or trust interests						-	
12	Securities - Miscellaneous							
13	Qualified conservation contribution — Historic structures							
14	Qualified conservation contribution — Other							
15	Real estate — Residential							
16	Real estate — Commercial							
17	Real estate – Other						-	
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy		· · · · · · · · · · · · · · · · · · ·	_			_	
22	Historical artifacts							
23	Scientific specimens			··				
24	Archeological artifacts							
25	Other • () .							
26	Other • () .	<u> </u>						
27	Other • ()							
28	Other ()				<u> </u>			
29					29			
							Yes	No
30a	During the year, did the organization receive by cont hold for at least three years from the date of the initial	tribution any p	property reported in Part	t I, lines 1-28 that it	must			
	purposes for the entire holding period?					· 30a		Х
b	If 'Yes,' describe the arrangement in Part II							
31	Does the organization have a gift acceptance policy	that requires	the review of any non-s	tandard contributio	ns?	. 31	x	
	Does the organization hire or use third parties or relations on the contributions?					32a		x
b	If 'Yes,' describe in Part II							
	If the organization did not report an amount in colum	n (c) for a typ	e of property for which	column (a) is check	ked,			
	desemble in Dort II	• • • • • • • • • • • • • • • • • • • •	· · · ·					

Schedule M (Form 990) 2012 China Harvest, Inc.	54-1852027	Page 2
Supplemental Information. Complete this part to provide the information required and whether the organization is reporting in Part I, column (b), the number of conreceived, or a combination of both. Also complete this part for any additional information.	by Part I, lines 30b, 32 itributions, the number rmation.	b, and 33, of items
	<u>, , , , , , , , , , , , , , , , , , , </u>	
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TEEA4602 12/10/12

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Schedule M (Form 990) 2012

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization		Employer Identification number
China Harvest, Inc.		54-1852027
Pt_VI, Line 11b _ The financ	e_committee_reviews_the_990_and_makes	recommendations
and_a_summ	ary to the full Board for their revie	w, recommendations
and_approv	al. The Board Secretary signs the fi	nal approved 990.
Pt_VI, Line 15aSalary_dat	a for positions of comparable respons	ibility at similar
type of no	n-profit organizations are considered	when establishing
compensati	on levels for officers. The approval	for compensation
is discuss	ed at the annual board meeting. Offi	cers, for whom
the compen	sation is being approved, abstained f	rom discussion
and voting	·	
Pt VI, Line 15b Salary dat	a for positions of comparable respons	ibility at similar
type of no	n-profit organizations are considered	when establishing
compensati	on levels for key employees.	
Pt VI, Line 19 The organi	zation's Articles of Incorporation, w	hich
include_Co	nflict of Interest, Bylaws, and Finan	cial
Statements	are made available upon request.	
Pt_VI, Line 12cOfficers,	directors and key employees are requi	red to disclose
immediatel	y any conflicts which may arise.	
		
		
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